

**STATE BOUNDARY COMMISSION**

**ACT 191**

**CRITERIA QUESTIONNAIRE**

**FOR INCORPORATION**

RECEIVED  
DEPT. OF LABOR & ECONOMIC GROWTH

JUL 28 2008

STATE BOUNDARY COMMISSION

**BOUNDARY COMMISSION QUESTIONS  
FOR  
DEVELOPING PUBLIC HEARING INFORMATION**

*The term "unit" as used throughout this questionnaire refers to your township, city or village.*

**I. POPULATION**

A. Indicate the total population of your unit for each of the following:

1980 1213      1990 1014      2000 970

**II. POPULATION DENSITY AND LAND AREA**

A. Indicate the total number of acres or square miles in your entire unit and the population density (population/area) for 2000:

1. Total number of acres 19813 or square miles 31.

2. Density for 2000 equals 0.5 population per acre  
or 31 population per square mile.

B. If the Commission expanded the area for consideration please include separate figures for that area:

Total acres 72 or square miles 0.1125 in expanded area.

Population 100 in expanded area.

### III. LAND USE

- A. Enclose a copy of the long range plan for your unit or larger area (e.g. comprehensive Master Plan, Land Use Plan, Growth Management Plan).

If your unit does not have such a plan, include a county plan or other, if

available. List enclosures: Sebewaing TWP MASTER PLAN

\_\_\_\_\_  
\_\_\_\_\_

### B. Zoning

1. Does your unit have a zoning board or commission?

Yes X No \_\_\_\_

If yes, under what public act? PA 184 OF 1943 AS AMENDED

2. Has your unit has adopted a zoning ordinance?

Yes X No \_\_\_\_

If yes, enclose the applicable county zoning ordinance and map.

If no, is your unit in the process of initiating a zoning ordinance?

Yes \_\_\_\_ No \_\_\_\_

If yes, to what stage is it developed?

\_\_\_\_\_  
\_\_\_\_\_

3. If the Commission expanded the area for incorporation, what is the zoning for that area? R-2 Residential-Agr

4. Is any portion of the area proposed for incorporation being considered for rezoning? Yes \_\_\_\_ No X

If yes, describe the portion and the proposed change.

\_\_\_\_\_  
\_\_\_\_\_

5. List below the approximate acreage of the land zoned in your unit.

	A. Number of Acres Zoned	B. Number of Acres Used as Zoned	C. % of Acres Used as Zoned (B/A x 100)
R-2 RESIDENTIAL	<u>1600</u>	<u>1600</u>	<u>100</u>
COMMERCIAL	<u>150</u>	<u>50</u>	<u>33</u>
INDUSTRIAL	<u>400</u>	<u>300</u>	<u>75</u>
AGRICULTURAL	<u>17280</u>	<u>17280</u>	<u>100</u>
OTHER	<u>      </u>	<u>      </u>	<u>      </u>

#### IV. STATE EQUALIZED VALUATION

Provide the state equalized valuation of your unit for the last three years.

Start with present year:

A. Real Property	<u>2008</u>	<u>2007</u>	<u>2006</u>
Residential	\$ <u>16 011 300</u>	\$ <u>16 121 300</u>	\$ <u>15 816 700</u>
Commercial	\$ <u>1 375 700</u>	\$ <u>1 351 300</u>	\$ <u>1 360 300</u>
Industrial	\$ <u>1 985 200</u>	\$ <u>1 578 400</u>	\$ <u>1 521 000</u>
Agricultural	\$ <u>33 461 700</u>	\$ <u>27 865 800</u>	\$ <u>28 911 200</u>
Developmental	\$ <u>      </u>	\$ <u>      </u>	\$ <u>      </u>
Timber Cutover	\$ <u>      </u>	\$ <u>      </u>	\$ <u>      </u>
Utilities	\$ <u>      </u>	\$ <u>      </u>	\$ <u>      </u>
<b>TOTAL</b>	\$ <u>      </u>	\$ <u>      </u>	\$ <u>      </u>

B. Personal Property	<u>2008</u>	<u>2007</u>	<u>2006</u>
Residential	\$ <u>- 0 -</u>	\$ <u>      </u>	\$ <u>      </u>
Commercial	\$ <u>      </u>	\$ <u>      </u>	\$ <u>      </u>
Industrial	\$ <u>      </u>	\$ <u>      </u>	\$ <u>      </u>
Agricultural	\$ <u>- 0 -</u>	\$ <u>      </u>	\$ <u>      </u>
Developmental	\$ <u>- 0 -</u>	\$ <u>      </u>	\$ <u>      </u>
Timber Cutover	\$ <u>- 0 -</u>	\$ <u>      </u>	\$ <u>      </u>
Utilities	\$ <u>      </u>	\$ <u>      </u>	\$ <u>      </u>
<b>TOTAL</b>	\$ <u>4 560 100</u>	\$ <u>3 890 000</u>	\$ <u>2 991 900</u>

C. Give the current equalization factor for your unit: 200 8 EF 1,000

D. Give the most recent year's state equalized valuation for the area proposed for incorporation \$ 45,004,000. If the Commission expanded the area give the S.E.V. for that area \$ 3,528,100.

## V. ALLOCATED AND VOTED MILLAGE RATES FOR THE LAST 3 YEARS

(Purpose: General Fund, Debt Retirement, Pension Fund)

Start with present year:

200 8

Unit Millage		County Millage		School Millage	
Purpose	Amount	Purpose	Amount	Purpose	Amount
OPERATING	1.2820	OPERATING	4.3807	OPERATING	18.000
EMRG SERVICES	1.000	TRANSIT	0.1991		
SINK FUND	0.2477	OLDER CIT	0.1991	Debt	7.000
ROADS	2.9861	MED CARE	0.4887	ISO	4.2409
		ROADS	0.9971		
LIBRARY	0.50	VETERANS	0.08		
TOTAL	6.0158	TOTAL	6.3447	TOTAL	29.2409

200 7

Unit Millage		County Millage		School Millage	
Purpose	Amount	Purpose	Amount	Purpose	Amount
OPERATING	1.282	OPERATING	4.3807	OPERATING	18.000
EMRG SERVICES	0.9861	TRANSIT	0.1991		
SINK FUND	0.2477	OLDER CIT	0.1991	Debt	7.000
ROADS	3.9722	MED CARE	0.4887	ISO	4.2409
		ROADS	0.9971		
LIBRARY	0.49580	VETERANS	0.08		
TOTAL	6.9838	TOTAL	6.3447	TOTAL	29.2409

200   

Unit Millage		County Millage		School Millage	
Purpose	Amount	Purpose	Amount	Purpose	Amount
OPERATING	1.282	OPERATING	4.3807	OPER	18.000
EMRG SERVICES	0.9861	TRANSIT	0.1991		
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ROADS	3.9722	MED CARE	0.4887	ISO	4.2409
		ROADS	0.9971		
LIBRARY	0.49580	VETERANS	0.08		
TOTAL	6.9838	TOTAL	6.3447	TOTAL	29.2409

## VI. TOPOGRAPHY / NATURAL BOUNDARIES / DRAINAGE BASINS

- A. Unusual or restrictive topographic features that could inhibit the use or development of the area proposed to be incorporated are:

<input type="checkbox"/> Extreme changes in elevation	<input type="checkbox"/> Wetlands
<input type="checkbox"/> Perk test failure	<input type="checkbox"/> Bedrock near the surface
<input type="checkbox"/> Flood plain	<input checked="" type="checkbox"/> Prime agricultural land
<input type="checkbox"/> Drainage basin	<input type="checkbox"/> Other _____

- B. How does this proposed incorporation relate to natural boundaries and drainage basins? (Include aerial map if available.)

\_\_\_\_\_  
\_\_\_\_\_

## VII. BOUNDARY HISTORY

- A. During the past 10 years, has your unit been involved in any proposed detachments, incorporations, annexations, or consolidations?

Yes ☐ No ☒

**If yes**, list the following for each case (attach extra sheets if necessary):

TYPE OF ADJUSTMENT PROPOSED: \_\_\_\_\_

(Detachment, incorporation, annexation, consolidation)

REQUEST INITIATED BY: \_\_\_\_\_

(Registered electors, property owners, city council, township board)

DATE REQUEST FILED: \_\_\_\_\_ DATE OF DECISION: \_\_\_\_\_

DECIDED BY: \_\_\_\_\_

(Referendum, County Commission resolution, City Council resolution, City/Township mutual resolutions, State Boundary Commission action, Circuit Court, other court)

FINAL DECISION/ACTION: \_\_\_\_\_

- B. Of the annexations accomplished, are these areas receiving all the city's services? Yes \_\_\_ No \_\_\_ *NA*

Number of annexations in past 10 years: 0

If no, list the areas not receiving services and the services they lack:

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- C. Does your unit have any joint policies or agreements with adjacent units of government?

Yes X No \_\_\_

Please list policies covered and units involved

TYPE OR FUNCTION INVOLVED	UNITS INVOLVED
<u>HARBOR COMMISSION</u>	<u>Seb Twp - Seb Village</u>
_____	_____

## VIII. PAST AND PROBABLE FUTURE GROWTH & DEVELOPMENT

- A. Please indicate the number of building permits issued for the following categories by your unit of government within the last 3 years?

\_\_\_ Industrial                      6 Single Residential Units  
\_\_\_ Commercial                      \_\_\_ Multiple Housing Structures

- B. Business development

1. How many new businesses opened in the last 5 years? 1  
How many new jobs were created? 1

2. How many businesses expanded their operations in the last 5 years?  
0  
How many new jobs were added? \_\_\_\_\_

3. How many businesses reduced their operations in the last 5 years?

0

How many jobs were lost? \_\_\_\_\_

4. How many businesses moved or closed their operations in the last 5 years? 1

How many jobs were lost? 12

- C. Have any special studies been conducted in your area regarding the general economic situation?

Yes \_\_\_ No X In Process \_\_\_

If yes, enclose copy.

- D. Which of the following development tools serve your unit?

X

Economic Development Corporation (PA 338, 1974)

\_\_\_

Local Development Finance Authority (PA 218, 1986)

\_\_\_

Tax Increment Finance Authority (PA 450, 1980)

\_\_\_

Downtown Development Authority (PA197, 1975)

\_\_\_

Shopping Center Redevelopment Area (PA 120, 1961)

\_\_\_

Empowerment Zone/Enterprise Community/Enterprise Zone

\_\_\_

Local Revolving Loan Fund

\_\_\_

Other \_\_\_\_\_

## IX. NEED FOR ADDITIONAL PUBLIC SERVICES

- A. Which additional services not presently available to your unit, residents, and/or property owners do you consider necessary in the area proposed for incorporation?

	SERVICE	DATE IT CAN BE AVAILABLE
1.	<u>None</u>	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____

- B. Of the services listed above, which is expected to be difficult to obtain?

NA

Why? \_\_\_\_\_

**X. PROBABLE EFFECTS OF PROPOSED INCORPORATION ON THE  
COST AND ADEQUACY OF SERVICES**

- A. If incorporation takes place, how will the change affect the unit of government involved? IT WOULD HAVE A DEVASTATING AFFECT TO THE GENERAL FUND, CONTRACTUAL AGREEMENTS WOULD HAVE TO BE NEGOTIATED WITH THE CITY FOR EMERGENCY SERVICES AND LIBRARY and IT HAS THE POTENTIAL TO BE DEVISING IN THE COMMUNITY.

- B. If incorporation takes place and public services are improved, what additional cost will the affected areas incur, and how adequate will those services be?

NA

- C. If incorporation takes place, what will be the financial effect on the remaining area from which the incorporated area is removed?

THERE SHOULD NOT BE VERY MUCH FINANCIAL EFFECT ON THE REMAINING AREA AS FAR AS PROPERTY VALUES ARE CONCERNED.



- D. If incorporation takes place what will be the financial effect on the incorporated area?

PROPERTY OWNERS IN THE EXPANDED  
AREA WILL LIKELY SEE HIGHER TAXES AND  
LOWER PROPERTY VALUES.

## XI. PUBLIC SERVICES

### A. Public Water *NA*

1. Does your unit provide public water service? Yes \_\_\_ No X
2. If yes, who owns the water treatment plant(s)? \_\_\_\_\_
3. If the water treatment plant does not belong to your unit, does your unit have a utility equity in the water system? Yes \_\_\_ No X
4. How many public water customers does your unit serve? NA
5. Give the number of homes and also the section numbers in which public water is not available.  
No. of homes \_\_\_\_\_ Section No(s). \_\_\_\_\_
6. Maximum capacity of your public water system is  
\_\_\_\_\_ GALS/PER/DAY.  
Average present usage is \_\_\_\_\_ GALS/PER/DAY, \_\_\_\_\_ % of capacity.
7. Is your unit under orders or has it been cited by the Michigan Department of Environmental Quality, Department of Natural Resources, Water Resource Commission or any other state or federal agency for any specific problem? Yes \_\_\_ No \_\_\_

8. If yes, give the nature of the orders or citations, dates, and what actions have been taken

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9. Have the issues been addressed or resolved satisfactorily?

Yes \_\_\_ No \_\_\_

If not, please explain either why not or provide the current status:

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10. Does your unit serve public water to the entire area proposed for incorporation? Yes \_\_\_ No \_\_\_

11. If not, how near are water mains of a size adequate to serve the entire area? \_\_\_\_\_

12. How is your public water system financed?

___ General obligation bonds	___ Consumption fees
___ Special assessments	___ Tap-in fees (amount \$ _____)

13. What is the estimated cost per linear foot to install water lines in the street?

\$ \_\_\_\_\_

What is the estimated cost per linear foot to extend lines on site?

\$ \_\_\_\_\_

14. If public water service is not available, what other types of water services are available to residents?

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15. Have any governmental agencies placed any restriction on adding new customers to you public water system?

If yes, describe these restrictions.

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16. Do you have any plans to expand your water system in the new future?

Yes \_\_\_ No \_\_\_

If yes, what presently unserved sections or areas will receive services?

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17. How many new customers are expected to be served? \_\_\_\_\_

18. What is the estimated total number of customers who will ultimately be served following this expansion? \_\_\_\_\_

19. This expansion is:

\_\_\_ under study \_\_\_ under contract \_\_\_ under construction

20. Estimated date service will be available: \_\_\_\_\_

21. What charges do customers within your unit pay to receive public water?

\$ \_\_\_\_\_ hookup fees

\$ \_\_\_\_\_ per 1000 gals.

22. If water is purchased under contract, do customers outside the unit pay the same rate as those within the unit providing the service?

Yes \_\_\_ No \_\_\_

If no, what charges do customers outside the unit pay to receive public water? \$ \_\_\_\_\_

23. Are special charges made in lieu of an assessment?

Yes \_\_\_ No \_\_\_

If yes, what are the charges? \$ \_\_\_\_\_

24. What must customers outside the providing unit do to receive this public water?

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25. If incorporation does not occur, how soon would the area proposed for incorporation receive public water services?

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**B. Sanitary Sewer** *NA*

1. Does your unit provide sanitary sewer service?

Yes \_\_\_ No ☒

If yes, who services the treatment plant?

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2. If the sewage treatment plant does not belong to your unit, does your unit possess a utility equity in the sewer system?

Yes \_\_\_ No \_\_\_

3. How many sewer customers does your unit serve now? \_\_\_\_\_

4. How many homes in your unit do not have sewer hookups available?

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In what sections or areas?

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5. What is the highest level of waste water treatment is being provided:  
Primary \_\_\_\_ Secondary \_\_\_\_ Tertiary \_\_\_\_
6. What methods of waste water treatment are being used?  
(Check all that apply.)  
\_\_\_\_ Activated Sludge                      \_\_\_\_ Trickling Filter  
\_\_\_\_ Lagoons                                  \_\_\_\_ Groundwater Discharge Mound  
\_\_\_\_ Rotating Biological                      \_\_\_\_ Sand Filter  
\_\_\_\_ Contactors or Disks                      \_\_\_\_ Other \_\_\_\_\_  
\_\_\_\_ Sequencing Batch Reactors
7. Where does the wastewater treatment plant discharge its effluent?  
Surface water (Name/Location) \_\_\_\_\_  
Ground infiltration (Name/Location) \_\_\_\_\_
8. Maximum capacity of the sewer system is \_\_\_\_\_ gal/day.
9. The average usage is \_\_\_\_\_ gal/day \_\_\_\_\_ % capacity.
10. Does your sewer ordinance require residents to hook up?  
Yes \_\_\_\_ No \_\_\_\_  
If yes, how near does the sewer line have to be? \_\_\_\_\_ feet
11. Does your unit provide sanitary sewer service to the area proposed for  
incorporation? Yes \_\_\_\_ No \_\_\_\_
12. How is your sewer system financed?  
\_\_\_\_ General obligation bonds                      \_\_\_\_ Revenue bonds  
\_\_\_\_ Special assessments                      \_\_\_\_ Consumption Rates  
\_\_\_\_ Tap-in fees (Amount \$ \_\_\_\_\_)                      \_\_\_\_ Other: \_\_\_\_\_
13. What is the cost per foot for installation of sewer lines in the street?  
\$ \_\_\_\_\_  
What is the estimated cost per foot for extension on site? \$ \_\_\_\_\_

14. Are you under orders to improve your waste water treatment?  
Yes \_\_\_ No \_\_\_  
If yes, describe: \_\_\_\_\_
15. Do you have any plans to expand the sewer system in the near future?  
Yes \_\_\_ No \_\_\_  
If yes, what sections or areas will receive services?  
\_\_\_\_\_
16. Have you received approval from the involved state agencies for expansion of the sewer system? Yes \_\_\_ No \_\_\_
17. What is the estimated total number of customers who will ultimately be served by this expansion? \_\_\_\_\_
18. This expansion is:  
\_\_\_ under study \_\_\_ under contract \_\_\_ under construction
19. Estimated date service will be available: \_\_\_\_\_
20. What do customers within your unit pay to receive sewer service?  
\$ \_\_\_\_\_ connection fee  
\$ \_\_\_\_\_ per 1000 gal.
21. If sewer service is purchased under contract, do customers outside the unit pay the same rate as those within the unit providing the services?  
Yes \_\_\_ No \_\_\_  
If no, what charges do customers outside the unit pay to receive sewer service? \$ \_\_\_\_\_

22. Are special charges made in lieu of an assessment?

Yes \_\_\_ No \_\_\_

If yes, what is the amount? \$ \_\_\_\_\_

23. What must customers outside the providing unit do to receive this sewer service?

\_\_\_\_\_

24. If incorporation does not occur, how soon would the area proposed for Incorporation receive sewer service? \_\_\_\_\_

### C. Fire Protection

1. Fire protection for your unit is provided by:

a. ☒ your own department

b. \_\_\_\_\_ contract from another unit

c. the \_\_\_\_\_ Fire District which serves the following units: \_\_\_\_\_

2. Underwriters rating: 8 - 10

3. What is the staffing composition of the fire department that provides fire protection to your unit?

Full-time \_\_\_\_\_ Volunteer ☒

4. How is the fire department financed?

☒ Special Assessment \_\_\_\_\_ Charge for each fire run

\_\_\_\_\_ General obligation bonds \_\_\_\_\_ General operating funds

\_\_\_\_\_ Other \_\_\_\_\_

5. Who provides fire protection to the area proposed for incorporation?

Sebawaing Twp Underwriters rating: 7

6. If the incorporation is approved, who would provide fire protection?

CITY would need to CONTRACT with the TWP.

7. How near is the fire station now providing fire protection to the area proposed for incorporation?

0.75 M. / e

8. If the incorporation is approved, how near is the fire station that provides fire protection?

SAME IF THE CITY CONTRATS WITH THE TWP.

**D. Police Protection**

1. Police protection for your unit of government is provided by:

☐ your own department

☒ the county sheriff

☐ contract from another unit: \_\_\_\_\_

☐ from the \_\_\_\_\_ Joint Service District which serves the following units: \_\_\_\_\_

2. What is the staffing composition of the police department? NA

Full-time: \_\_\_\_\_ Part-time: \_\_\_\_\_

3. How is the police department financed?

☐ Special Assessment

☐ Charges for each police run

☐ General obligation bonds

☐ General operating funds

☐ Other \_\_\_\_\_

4. Who provides police protection to the area proposed for incorporation?

COUNTY SHERIFF

5. If the incorporation is approved, who would provide police protection?

CITY

6. How near is the police station now providing police protection to the area proposed for incorporation? 0.75 M. / e



If yes, is it: X unit operated \_\_\_\_\_ county wide \_\_\_\_\_ area wide

H. School District Unionville Sebewaing Area Schools

I. Other services available to your unit's residents

Type of service	Furnished by unit or on contract?	Method of financing
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

XII. FINANCIAL ABILITY TO PROVIDE AND MAINTAIN SERVICES TO AREA

A. What major capital improvements have taken place in your unit in the last five years, and how were they financed?

IMPROVEMENT	FINANCED
1. <u>New Twp Hall</u>	<u>General Fund</u>
2. _____	_____
3. _____	_____
4. _____	_____

B. Does your unit currently have an application for bonds before the Michigan Municipal Finance Commission? Yes \_\_\_ No X

If yes, state the kind of bond, purpose, total amount of bonded indebtedness and the maturity date.

KIND	PURPOSE	AMOUNT	MATURITY DATE
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____

C. Indebtedness related to area proposed for incorporation.

1. Does your unit of government have any bonded indebtedness in place or in process that affects the area proposed for incorporation?

Yes \_\_\_ No X

If yes, state the following about the debt:

KIND	PURPOSE	AMOUNT	MATURITY DATE
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____

Also, if yes attach copies of any "Order of Approval" issued to your unit by the Municipal Finance Commission that relate to bonds for sewer or water facilities serving the incorporation area and include copies of maps describing the physical location of the sewer and water lines.

2. Has your unit incurred any other liabilities relating to the area proposed for incorporation? Yes \_\_\_ No X

If yes, describe the liabilities and their values (\$).

_____	\$ _____
_____	\$ _____
_____	\$ _____

3. Has your unit signed any other contractual agreements affecting the area proposed for incorporation? Yes \_\_\_ No X

If yes, list the agreements and include copies.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Has your unit accumulated any assets attributable to the area proposed for incorporation? Yes \_\_\_ No X

If yes, describe the assets and their values (\$).

\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_

5. What percent of your total sanitary sewer, public water, storm drainage and other utility exist in the area proposed for incorporation? NA

\_\_\_\_\_% sewer                      \_\_\_\_% public water  
\_\_\_\_\_% storm drainage          \_\_\_\_% other \_\_\_\_\_

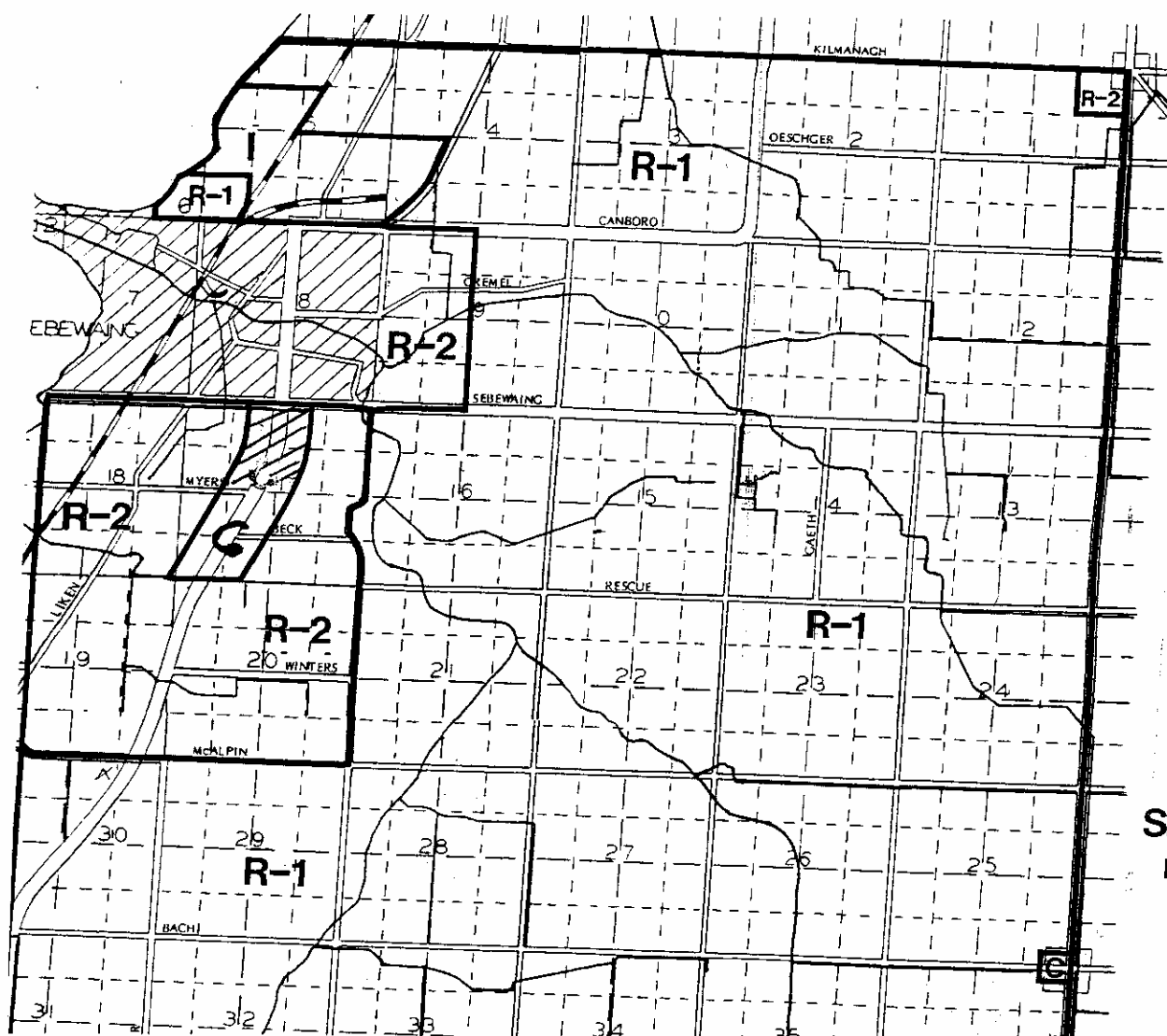
### XIII. GENERAL EFFECT UPON COMMUNITY OF PROPOSED ACTION

- A. What is the position of your government officials on this proposed incorporation?
- B. What is the position of the residents of the proposed incorporation area towards this petition?
- C. What is the position of your constituents towards this petition?

THE PROPOSED INCORPORATION WOULD NOT HAVE MUCH AFFECT ON THE TOWNSHIP LAND USE PLAN.

Name	Title/Company/Organization	Telephone (+ area code)
WILLET OESCHGER	TWP SUPERVISOR	989-883-2120
KURT BACH	TWP CLERK	989-883-2120

Date Completed 07-24-08



# ZONING DIST

- R-1 R-1 Farming
- R-2 R-2 Single F
- R-3 R-3 Multiple I
- R-4 R-4 Moble Ho
- C C - Commercia
- I I - Industrial

## SEBEWAING TOWNS HURON COUNTY, MICHIGA

- VILLAGE